SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN SIG Residence

Date Sterrip (Received)

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN I

MAY 067013

Refund: Permit #: 5-10-13 5-7-13 450

Owner(s): (If there are Multiple	\$ ∄ ∵	I (we) declare that this appli					☐ Municipal Use							🔀 Residential Use			Proposed Use	Proposed Construction:	Existing Structure: (if permit being applied for is relevant to it)	7				^		Value at Time of Completion * include donated time & material	XNon-Shoreland		☐ Shoreland → Cr		Section 24	SE 1/4, SE	PROJECT Le		ろくけ、(Person Signing Application on behalf of Owner(s))	Contractor;	ory:	James Peter	TYPE OF PERMIT REQUESTED	O NOT START CONSTRUCTION	backs are made navable to: Bayfield County Zoning
Owners listed on t	detail and accuracy of County relying on this any reasonable time for	FAI ation (including any ac	430 X			□ Acc	_+			3 R						Prin		n:	permit being app	EXISTIAS	Property (Run a Business on	Conversion	Addition/Alteration	New Construction	Project (What are you applying for)			eek or Landward	s Property/Land	Township 45	1/4	Legal Description:		Signing Application (oy 17	N	MeC	400000	N UNTIL ALL PERM	THE DOUCH WITH TOP
Owner(s): () —	he detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in de did County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county office any reasonable time for the purpose of inspection.	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES y accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct	Other: (explain) ブェルり	Conditional Use: (explain)		Accessory Building Addition/Alteration	1	Addition/Alteration (specify)	Mobile Home (manufactured date)	With Attached Garage	with (2) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Principal Structure (first stru			illed for is relevant to it)			on No Basement		tion 🛭 1-Story + Loft	on 🔏 1-Story	# of Stories and/or basement			Creek or Landward side of Floodplain? If yescontinue Is Property/Land within 1000 feet of Lake, Pond or Flowage	within 300 feet of River. Str	N, Range W	Gov't Lat Lot(s) (tatement)			Con	City City	arthy 2	X LAND USE SANITARY	necks are made payable to: Bayrield County Loning Department. O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	line Denartment
or letter(s) of authorization	ng and that it will be relied upon in or with this application. I (w	ARTING CONSTRUCTION WI amined by me (us) and to the be	and Kesia			/Alteration (specify)			0 7	arage sleeping quarters, or					5 of the city cetts)	h hinting shack etc.)	Proposed Structure	Length:	Length: 40					рп	□ Seasonal	Use		If yescontinue -	4	(incl. Intermittent)	Town of:	CSM Vol & Page		() 33 diates)	Agent Phone: Ag	Contractor Phone: RIU	City/State/Zip:	Mailing Address: Ma Co Rd W	□ PRIVY		Y. CO.
on must accomp	n by Bayfield Count e) consent to coun	THOUT A PERMI	dence							: cooking &										The state of the s	1 5 1	□ None	3 3	X 2		# Of bedrooms			Distance Structure	Distance Structure	GENCS	Lot(s) No.	30		or - Kines ent Mailing Addres	Flumber: 2	640	Giv)	□ CONDITIONAL USE	DO I FILL OUT T	**************************************
any this application)	termining whether i als charged with ac	RESULT IN PENA and belief it is true,								food prep facilities)								wiath:	Width: 8	□ None	☐ Compost Toilet	☐ Portable (w/service cont		1 1	☐ Municipal/City	W/ Sewer/ Is on			is from Shorelin	ture is from Shoreline :	Lo	Block(s) No. Su	7.0	000	VOC - FineS Flow Wag		72	Sleywoodeitu	LUSE SPECIAL USE	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)	
Date S//	to issue a permit. I (we) further accept liability which fiministering county ordinances to have access to the	TES	8 × 0h 1	(X	Y	(X			×	The state of the s	~ ~	< ×	(x	×	×	×	Dimensions	neignt:	Height:			vice contract)) Specify Type: (p#V			What Type of Sewer/Sanitary System Is on the property?		feet X No	it Floor		Lot Size #	Subdivision:	356	At				100 C/045	USE BOA.	ur website www.bayfiel	
10013	er accept liability which to have access to the	cknowledge that I (we))							*	·)		Square Footage	1	13	The state of the s		Ballori			□ Clty	Water		XNo	nn Are Wetlands Present? Pes	$ \mid$ \mid	2.98		856 Page(s) 874	iched es XNo	715-739-6767 Written Authorization	mber Phone:	Cell Phone:	Telephone: 715 265 - 4515	OTHER	dcounty.org/zoning/asp)	

Attach

Copy of Tax Statement

F you recently purchased the property send your Recorded Deed

Date

SANTARY INFONCEDED.

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

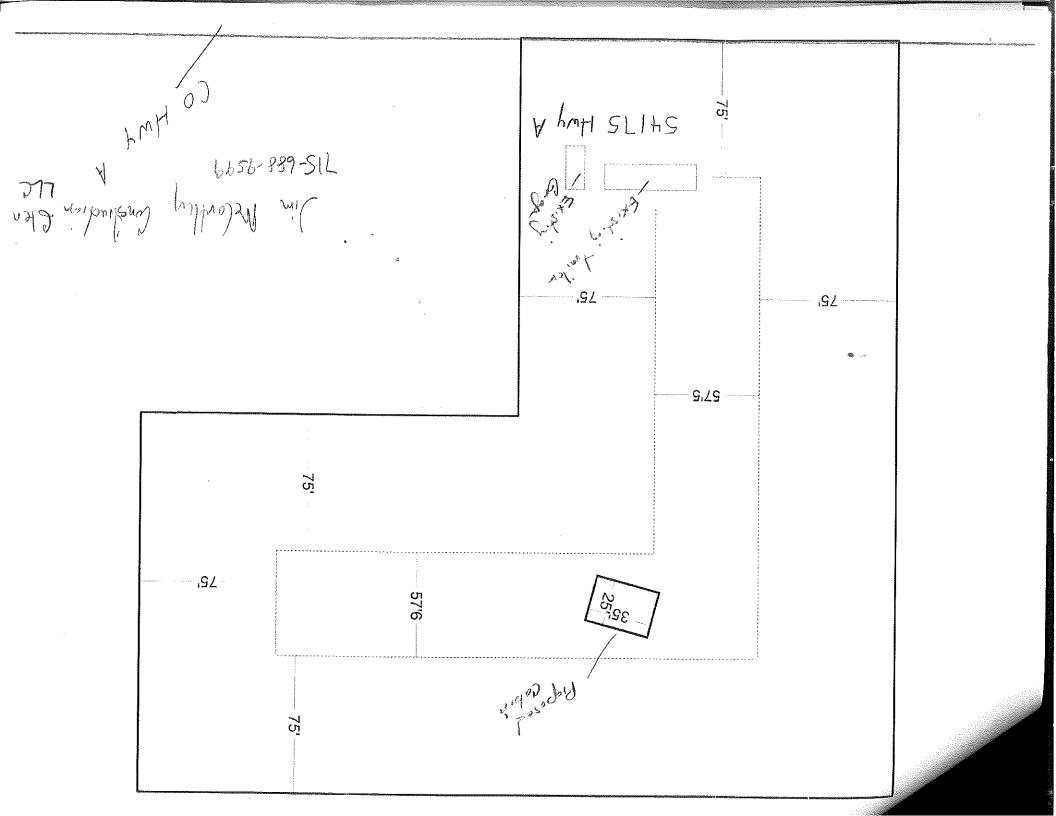
Address to send permit

Some

about

Authorized Agent:

Date of Aggreyay — / 3			3 1			T. Marin	Signature of the
il home mus	tus (mobile	No-(If No they need to be attached.) Anterint: Struct I the that the way		_ & _	rd Conditions インジン ユーシー	Condition(s): Town, Committee or Board Conditions Attached? Mr suppurusion of Structu	Condition(s): To
Zoning District (FJ) Lakes Classification (MA) Date of Re-Inspection:	Zoning Lakes C Date o	Futbole	W. M.	Inspected by:	The state of the s	ue is existing	Inspection Record: Structure in A Date of Inspection: 5-7
□ No	Were Property Lines Represented by Owner XXYes Was Property Surveyed XYes	Were Property Lines		No No	ØØ Yes □ Yes	Parcel Legally Jarding Site De	Was Proposed
) G _	· ~				္မ	Granted by Variance (B.O.A.)
Affidavit Required ☐ Yes ØÇNo Affidavit Attached ☐ Yes ØÇNo	□ Yes XVo Affidavit □ Yes XVo Affidavit	Mitigation Required Mitigation Attached				Is Parcel a Sub-Standard Lot Styles Is Parcel in Common Ownership Structure Non-Conforming Styles	Is Parcel a S Is Parcel in Corr Is Parcel in Corr
		(2/2	Denial:	Reason for Denial: Permit Date:		Pate):	Permit Denied (Date): Permit #・/・スー人
Sanitary Date: 6/3463	# of bedrooms: Q Sanita	4333 #	Sanitary Number: 40433	Sanitary Nu	Jse Only)	Issuance Information (County Use Only)	ssuance info
<u>Privy (P)</u> , and <u>Well (</u> W). In. Iling Code.	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	Septic Tank (ST), Drain the Date of Issuance if Municipalities Are Requi	onstruction, (1) Year from welling: ALL I	tion(s) of New C rmits Expire One e & Two Family D al Town, Village, C	אposed Loca III Land Use Pe או Of New On The loca	Stake or Mark Pro NOTICE: A For The Construction	(9)
om one previously surveyed corner to the nust be measured must be visible from ed site of the structure, or must be	ther previously surveyed corner to marked by a licensed surveyor at the owner's expense. The previously surveyed corner to marked by a licensed surveyor at the owner's expense. The previously surveyed corner to construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arrested by a licensed surveyor at the owner's expense.	the minimum required setback, the bo	inty (30) feet from the Department by use	the owner's expense. O) feet but less than thin services than thin services than the D	more than ten (1) sty surveyed come	yed corner or marked by a lice or construction of a structure or construction of a structure d corner to the other previous arveyor at the owner's expension.	other previously surver Prior to the placemen one previously survey marked by a licensed i
		houndary line from which the co	n	35°	ng)	Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of	Setback to Drai Setback to Priv
/V # Feet	biain	Elevation of Floodplain	reet	7, 2	A.W.	East or Holdin	Setback to Sontic
NH Feet	and Siope Area	Setback from Wetland Setback from 20% Slope	Feet	7 0°		[6 B	Setback from the
	1	Setback from the Bank or Bluff	Feet	115	1	e North Lot Line	etback from th
Feet Feet	ake (ordinary high-water mark) liver, Stream, Creek	Setback from the Lake (Setback from the River,	Feet	282	ed Road rf-Way	from the Centerline of Platted Road from the Established Right-of-Way	Setback from t
Measurement	Description		ment	Measurement		Description	
ed by the Planning & Zoning Dept.	Changes in plans must be approved by	Char		cinuing) osest point)	(prior to cont red to the cl	(8) Setbacks: (measured to the closest point)	Please comp
			No.	ce attached	500	Apple (1) - (2) - (2)	
/							
) Privy (P)	Proposed Construction North (N) on Plot Plan () Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Pl (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	id (Name Frontage Roa perty (*) Drain Field (DF); (*) ek; or (*) Pond 3%	rontage Road on your Prop : Tank (ST); (Stream/Cree opes over 20	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (All Existing Structures on your Proper (*) Well (W); (*) Septic Tank (ST); (*) (*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20%		Show / Indicate: Show Location of (*): Show: Show: Show: Show: Show any (*): Show any (*):	(2) (3) (5) (6) (7)



SÜBMIT: <u>COMPLETED</u> APPLICATION, TAX Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Permit #:

\$120,00

CHIERED)

Date Sump (Maceilean) ודעדון

Date: Refund: Amount Paid: いいいい (v) S-4-13

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Bayfield Co. Zoning Dep

							.,,		
Shoreland X Is Property/Land within 1000 feet of Lake, Pond or Flowage	☐ Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶	Section Sol Township 144N N, Range ROGN	SE 1/4, SE 1/4 Gov't Lot Logis	PROJECT Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s)) JEFF Johnson		Address of Property: (870 TARS POND Rd)		DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. TYPE OF PERMIT REQUESTED—> J LAND USE
<u></u>		Town of: 3 Aares	37/ V.5 1.246	04-004-7-44-03-01-4 04-000-20 000	Agent Phone: Age 6/2 803 0 775 49	Contractor Phone: Plui	City/State/Zip:	Mailing Address: 215 Mbone 77 W	PRIVY
Distance Structure is from Shoreline:	Distance Structure is from Shoreline :	ere per la companya de la companya d	Lot(s) No. Black(s) No.	04-000-20000	Agent Mailing Address (include City/State/Zip): 49675 CHY Show Nd BACNOS 54873	Plumber:	51873	City/State/Zip: My 55082	☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.A. ☐ OTHER
		Lot Size	Subdivision:	Recorded Document	State/Zip): BACNOS SYS)			5082	CIAL USE B.O.A.
□ Yes □ Yes № No	Is Property in Are Wetlands Floodplain Zone? Present?	Acreage 4.536		Recorded Document: (i.e. Property Ownership) Volume 833 Page(s) 733	Written Authorization Attached WE Yes No	Plumber Phone:	Cell Phone:	Telephone: (12-865-51%)	A. OTHER

Non-Shoreland						
Value at Time of Completion * include donated time &	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
	New Construction ■	💢 1-Story	☐ Seasonal	_ 1	☐ Municipal/City	□ City
}	☐ Addition/Alteration	☑ 1-Story + Loft	🖄 Year Round	□ 2	☐ (New) Sanitary Specify Type: ☐	₩ Well
¥0000	☐ Conversion	□ 2-Story		□ 3	□ Sanitary (Exists) Specify Type: Sepから	
3	Relocate (existing bldg)	□ Basement			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	-
	☐ Run a Business on .	□ No Basement		₽ None	☐ Portable (w/service contract)	
	Property	□ Foundation			☐ Compost Toilet	
	1.111111111111111111111111111111111111	- California de			□ None	
Principle of the Paris of the P	20000000	10000000				

X is Property/Land within 1000 feet of Lake, Pond or Flowage
If yes---continue

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ng applied for is rel	Width:	Height:
Construction: Length: 40'	Width: '30'	Height: 20

Proposed Use	✓ Proposed Structure	Dimensions	Square Footage
The state of the s	Principal Structure (first structure on property)	(x)	
	Residence (i.e. cabin, hunting shack, etc.)	(X	And the state of t
	with Loft	(X)	
△ Residential Use	with a Porch	(X)	
	with (2 nd) Porch	×	
.,	with a Deck	(×	- Independent
	with (2 nd) Deck	×	
☐ Commercial Use	with Attached Garage	(x)	
	☐ Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	×	
	☐ Mobile Home (manufactured date)	×	Control of the Contro
1	Addition/Alteration (specify)	×	
☐ Municipal Use	Accessory Building (specify) Pole Baan	(Ohx 02.)	002)
	Accessory Building Addition/Alteration (specify)	(x)	
Rec'd for Issuance			
))	Special Use: (explain)	×	
	Conditional Use: (explain)	(x)	
2	Other: (explain)	(x)	· ·

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. [(we) adknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Authorized Agent: Authorized Agent: Address to send permit 1003 Capt Start Address to send permit 1003 Capt Start Address to send permit Copy of Tax Start Copy of
--

S 4 1 2 2 Copy of Tax Statement (F you recently purchased the property send your Recorded Deed

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Prior to the placement or construction of a structure within ten (10) feet of the minimum requiother previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

Issuance Information (County Use Only)	Sanitary Number: # of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:	
Permit # 13 -006/6	Permit Date: 5-1-13	
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming "Yes (Fused/Contiguous Lot(s)) Is Structure Non-Conforming	Discription Required	Affidavit Required ☐ Yes XNo Affidavit Attached ☐ Yes X No
Granted by Variance (B.O.A.) Case #:	Previously Granted by Variance (B.O.A.) □ Yes √2 No Cas	Case #:
Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No	Were Property Lines Represented by Owner Was Property Surveyed	XYes ONO
Inspection Record: 112.00 that Meet all settlecles.	ethales - ,	Zoning District (F-/) Lakes Classification (MA)
Date of Inspection: 1/2 2) -/ 3	inspected by: Mittach	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta May Mother Uses for h	Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached) water a May Mot be used for human habitation. He water a	suides pressus
in structure of Inspector.		Date of Approval:
Hold For Sanitary:	Hold For Affidavit: 🛘 Hold For Fees: 🗎	

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

*Bayfield County
Planning and Zoning Depart.
P® Box 58
Washburn, WI 54891
(715) 373-6138



BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

Refund: Date: Permit #: Amount Paid: #125 Ø5.8-33 4-16-13 13.88 188 ENTERED

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. Bayfield Co. Zoning Dept

	~	×					plain)	Other: (explain)			
)	X	_				Conditional Use: (explain)	Condition		Secretarial Staff	Se
	_	×	_			The state of the s	Special Use: (explain)	Special Us			
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The state of the s	_	×	_	And the second s		minut Variation TYTE	Addition/Alteration (specify)	Addition/		:]
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	_	 ×	-	sleeping quarters, or \square cooking & food prep facilities)	or □ cooking &	sleeping quarters, o	e w\\ □ sanitary, or	Bunkhouse w	. (8	
	_	×	-	***************************************		ge	with Attached Garage	HHA	The state of the s	Commercial Use	Ω □
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	_	< ×	+	***************************************	- Annual Company		with a Deck				
		< ×	+				with (2 nd) Porch				
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-		: ×		- Addition in the second			with Loft				
444		: :	-			lack, etc.)	(i.e. cabin, hunting shack, etc.)	Residence			
216	18)	/×	<u> </u>	A CANADA		re on property)	Principal Structure (first structure on property)	Principal 9	M		
Footage	sions	Dimensions		Andrew .	e	Proposed Structure	-		~	Proposed Use	P
6											
16	Height:		3	Width:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Length: 7 2		ing applied for	permit be	Existing Structure: (if permit being applied for is relevant to it) Proposed Construction:	Existi
							- Annual				
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Well	e:	city Type:	ry Specify	(New) Sanitary		☐ Year Round	1-Story + Loft	☐ Addition/Alteration	Addition/	/ 0 / 0	· ·
□ City		1		1			-	truction	New Construction	T	
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Water	∤?	pe of iry Syst	What Type of Sewer/Sanitary System Is on the property?	V Sewer Is or	# of bedrooms	Use	# of Stories and/or basement	applying for)	Project (What are you applying for)	me ion e&	Value of Co *
										XNon-Shoreland	XNor
) No	NO NO		feet		***************************************	continue —	If yes-				
□Yes	□ Yes		ine :	Distance Structure is from Shoreline:	Distance Stru	- 1	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	y/Land within	ls Property	Shoreland —] Shc
Are Wetlands Present?	ls Property in oodplain Zone?	ls P	ine : _ feet	cture is from Shoreline :	Distance Structure	itream (ind. Intermittent) If yescontinue	liver, s	Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	Is Property		
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₹ e	Acreage		Lot Size				, Range O G W	p ササ・N, Range	. Township	Section ()	
		On:	Subdivision:	Block(s) No.	Lot(s) No.	Vol & Page	Lot Lot(s) CSM	Gov't Lot	1/4	الاسک 1/4, الا	
Page(s) 443	95 Page(s) 4		Volume ل	000-4000	-12-2 Od-	204-2-44-09-	(Use Tax Statement) 04-00		Legal Description:	PROJECT LOCATION	5 =
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Written Authorization Attached	Written Attached		te/Zíp):	Agent Mailing Address (include City/State/Zip):	ent Mailing Ad		of Owner(s)) Agent Phone:	ication on behalf	Signing Appl	Authorized Agent: (Person Signing Application on behalf of Owner(s))	uthor
Phone:	Plumber Phone:				Plumber:	Contractor Phone: Ph	Contrac	•	,	200	Contractor:
				54873	TW	me.s		\$2 \$2	ro B	Ž	XX
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751-4487 E:	7	r	<i>2</i>	City/State/Zip:		ress:		,		Owner's Name:) Wner
OTHER	в.о.А. □ с	□ B .	LUSE	L USE 🗆 SPECIAL USE	CONDITIONAL USE	□ PRIVY □	USE SANITARY	X LAND USE	ESTED-	TYPE OF PERMIT REQUESTED→	344
www.bayfieldcounty.org/zoning/asp)	м.bayfieldcoun		our web	HOW DO I FILL OUT THIS APPLICATION (visit our website	DO I FILL OUT T) NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	L PERMITS HAVI	ON TILING NO	START CONSTRUCTION) NOT S

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Attach
Copy of Tax Statement V
If you recently purchased the property send your Recorded Deed

Address to send permit

Same

Q S

above

All being Students on Julian Prices on J
Show any (*): (*) Medicity (*) Speaks Tank (*): (*) Drain field (DF); (*) Holding Tank (*) (*) Medicity (*) Speaks over 20% Show any (*): (*) Medicity (*) Speaks over 20% Show any (*): (*) Medicity (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*) Speaks over 20% Show any (*): (*) Medicity of (*): (*) M
All Existing Structures on your Property (*)* (*)* (*)* Hooding Tank (*)* (*)* Danis Field (DF); (*) Hooding Tank (*)* (*)* (*)* (*)* Hooding Tank (*)* (*)* (*)* (*)* (*)* (*)* (*)* (*)
All basking Structures on your Property (*) Well (W.); (*) Specific Tank (S.); (*) Donal field (DF); (*) Holding Tank (H. (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wellands; or (*) Stream/Creek; or (*) Pond (*) Wellands; or (*) Stream/Creek; or (*) Pond (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Wellands; or (*) Stream/Creek; or (*) Stream (Freet) (*) Stream/Creek; or (*) Stream/C
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